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| <b>TRANSMITTAL OF PAYMENT OF ISSUE FEE</b><br><b>(37 C.F.R. 1.311)</b> | Docket No.<br>3294CON |
|--|-----------------------|

Applicant(s): Michael T. Unger

|            |             |                   |                |
|------------|-------------|-------------------|----------------|
| Serial No. | Filing Date | Examiner          | Group Art Unit |
| 10/621,492 | 07/17/2003  | Barry, Chester T. | 1724           |

Invention:  
ENHANCED ACTIVATED SLUDGE TREATMENT

**TO THE ASSISTANT COMMISSIONER FOR PATENTS**  
**ALEXANDRIA, VA 22313-1450**  
**ATTENTION: Mail Stop Issue Fee**

Transmittal herewith are the following for the above-identified application.

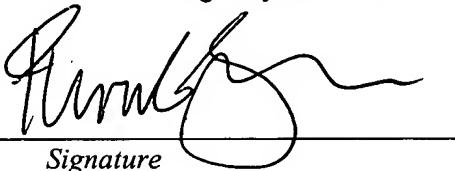
- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$665.00      ☐ Design Fee: \_\_\_\_\_
- ☒ Publication Fee: \$300.00

Entity Status:

- ☒ Small Entity
- ☐ Large Entity

☒ The Assistant Commissioner hereby authorized to charge and credit Deposit Account No.: 14-1131 as described below. A duplicate copy of this sheet is enclosed.


- ☒ Charge the amount of \$965.00
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.

  
\_\_\_\_\_  
Signature

Dated May 28, 2004

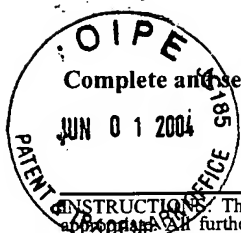
Thomas G. Scavone - Reg No. 26,801  
181 W. Madison-Suite 4600  
Chicago, IL 60602  
(312) 236-0733

I certify that this document and fee is being deposited on May 27, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231

  
\_\_\_\_\_  
Signature of Person Mailing Correspondence

Hannah Martin  
\_\_\_\_\_  
Typed or Printed Name of Person Mailing Correspondence

28th



## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

05/07/2004

Niro, Scavone, Haller & Niro  
Suite 4600  
181 West Madison Street  
Chicago, IL 60602

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

|                      |                    |
|----------------------|--------------------|
| HANNAH MARTIN        | (Depositor's name) |
| <i>Hannah Martin</i> | (Signature)        |
| 5-28-04              | (Date)             |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/621,492      | 07/17/2003  | Michael T. Unger     | 3294CON             | 2624             |

TITLE OF INVENTION: ENHANCED ACTIVATED SLUDGE TREATMENT

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | YES          | \$665     | \$300           | \$965            | 08/09/2004 |

| EXAMINER         | ART UNIT | CLASS-SUBCLASS |
|------------------|----------|----------------|
| BARRY, CHESTER T | 1724     | 210-196000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. *Niro, Scavone, Haller*  
2. *& Niro*  
3. *Chicago, IL*

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent); ☒ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 10

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 14-1131 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) *[Signature]*(Date) 5/28/04

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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